State of Wisconsin Department of Natural Resources PO Box 7921, Madison WI 53707-7921

## **Wisconsin Voluntary Emission Reduction Registry Project Information** Form 4500-175 (4/03)

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<b>Notice:</b> Use of this form is required in order to register any volui identifiable information will be used for program administration pcollected. This form is authorized under s. NR 437.07, Wis. Administration program administra	ourposes and is unlike					
Project Status						
Check one:	Correction of H	storic Data (Attach a bri	ief explanation of the altered fields.)			
Project Identification						
Registrant Name						
Project Name			_			
NR 438 Facility ID No., if applicable Standard Industrial Clas Four-digit Code, if applic		Air Permit Identification No	o. or numbers, if applicable			
Provide a brief description characterizing the nature of the busin	ness or other activity	of the applicant.				
Project Location	lo					
Address	County					
Town / City / Village	<b>'</b>		ZIP Code			
Project Information Contact						
Contact Name			Telephone Number			
Title			<u> </u>			
Fax Number E-Ma	ail Address					
Project Information						
Project Eligibility  1. Which of the following registry criteria does the emission reduction meet?  The emission reduction was not required by law  The emission reduction went beyond the requirements of the law  The emission reduction went beyond the requirements of the law  The emission reduction went beyond the requirements of the law  The emission reduction was not required by law or resulted in emissions lower than those allowed by law? (For example, reductions used for netting, offset credits, minor source status determinations are required by law and may not be registered as voluntary reductions.)						
Type of Emission Reduction Activity						
Renewable energy Product reformulation of Increase in vehicle fuel	or replacement	s, replacement or retirement	Alternative fueled vehicles Reduction in vehicle miles Fuel switch Beneficial Reuse or Recycling			
Other (specify):  Provide a description of the emission reduction, emission avoidates a description of the emission reduction.	ance, or carbon sequ	estration activity (Attach a	dditional sheets if necessary \			
Trovide a description of the emission reduction, emission avolu-	ance, or earborn sequ	D	ate Emission Reduction Was First chieved (month/year)			

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Include full sequestere	citation of all protocols used to measur d.	e, calculate, or estimate the emis	sions, emission reducti	ons, emissions	avoided, or car	bon
Type of Bas	seline (check one)					
			arbon Sequestration Ba	aseline	Multi	ple Baselines
Baseline Ca	alculation ( <i>Attach additional sheets as i</i>	necessary.)				
Provide the	emission reduction calculations. (Atta	ch additional sheets as necessary	/.)			
	mission reductions identified above agg se identify the aggregation method emp					
, , p		,				
Are there o	ther parties who may also be reporting	the emissions reductions for this	project? Yes	По		
If yes, pleas	se identify others who may share the er for each party.				determine emis	ssion
reductions	ior each party.					
In this potiv	ity included in any other emission tradi	ng or registry programs?				
	ity included in any other emission tradir se list the name and contact information		Yes ∐No			
Emission	Reduction Summary				,	
		Total Energy or Fuel Sa	Fuel Saved or Avoided (if applicable)		Emission Reduction, Avoidance or Sequestration	
Year	Greenhouse Gas or Air Contaminant	Type of Energy or Fue	Quantity	Unit of Measure	Quantity	Unit of Measure
Please incli	ude any additional information necessa	ry to establish an accurate emiss	ons reduction record.			
If you are re	egistering mercury collected, stored and	disposad of provide a description	on of the methods was	to store and d	isnasa of the ma	proury.
n you ale le	cylstering mercury collected, Stored and	ש מישףטשבע טו, אוטיועב א עבאטוואנוני	ar or the methods used	i io sidie aliu u	ispose of the file	noury.

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Registrant Certification				
I certify that, to the best of my knowledge and belief, all of the informapplication meets all of the requirements of chapter NR 437, Wis. A registered by another person.	nation contained in this formula. Code, and the volunta	m and attachments is accurate, that this ry emission reductions have not been		
Signature of Responsible Official	D	Date Signed		
Verification (if applicable)	·			
Type of Verification				
Self-Audit Third Party None				
Name of Company		Telephone Number		
Address	City	State ZIP Code		
Contact Name	Title			
If third party verification was done, provide a description of the verification powerification report.)	rocedure. (Attach additional s	heets as necessary or a copy of the		